

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000002295

**Entity Name:** MILESTONES COMMUNITY SCHOOL, INC.

**Current Principal Place of Business:**

3355 IMAGINE WAY  
WEST MELBOURNE, FL 32904

**FILED**  
**Aug 23, 2013**  
**Secretary of State**  
**CC6877244643**

**Current Mailing Address:**

3099 EAST COMMERCIAL BLVD  
SUITE 200  
FORT LAUDERDALE, FL 33308

**FEI Number: 59-3444711**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

KLAHR, JULIE F  
3099 EAST COMMERCIAL BOULEVARD  
STE. 200  
FT. LAUDERDALE, FL 33308 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title TD  
Name MANLY, ROBERT  
Address 201 1ST STREET N.E.  
City-State-Zip: FT. MEADE FL 33841

Title PD  
Name FEKETE, ALEX  
Address 1433 PALM DRIVE  
City-State-Zip: LAUGHLIN NV 89029

Title SCD  
Name BLAKE, RICHARD  
Address 916 BRUNSWICK LANE  
City-State-Zip: ROCKLEDGE FL 32955

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ALEX FEKETE**

**PRESIDENT**

**08/23/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date